

# YOUTH MENTAL HEALTH POLICY ASSIGNMENT REPORT

*Clark County Youth Commission*



*Presented to the Clark County Board of County Commissioners  
July 2007*

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## INTRODUCTION

As representatives of the future of Clark County, the Clark County Youth Commission presents the following analysis and recommendations to reduce youth depression in the county. We have been concerned with the welfare of our fellow youth and feel it would be meaningful to examine the state of teens in conjunction with depression to see how Clark County can better serve youth in their quest for self-actualization.

In October of 2006, the Youth Commission met with Bill Barron, who suggested we choose from four possible topics: public health, the methamphetamine crisis, a revision of the twenty-year growth plan, or sustainable development. The Youth Commission gathered at the annual winter retreat in order to research, debate, and decide on the issues. After a great deal of deliberation, the Youth Commission finally decided that we would be best equipped to help combat *teen depression* as a subcategory of public health, and finalized this decision with the BOCC on January 24, 2007 (Appendix I & II). The Youth Commission recognizes that teen depression is a relevant issue that is rarely addressed or discussed in our community. As advocates for both youth empowerment, and youth voice, we believe that by supporting new solutions and resources to help combat teen depression, we aid both the community and the youth that we represent.

On the road to creating our recommendations we hosted a focus group to collect the opinions of Youth Commissioners on depression. Additionally, we distributed surveys to students from a variety of local schools to acquire a bit of information on their experiences with depression. Having taken information from all these youth, along with information from various supplemental resources on depression and mental health, we have met to create this policy recommendation which we hope, with your help, will create more balanced, healthy lives for the youth of our community.

## PROCEDURE & METHOD

### Research

Research assignments relating to mental health services for youth in Clark County were divided among Clark County Youth Commissioners in the following categories: public awareness of youth mental health services, cultural competency, age of consent, stigma, youth consumer rights and responsibilities, youth suicide prevention, mental health resources specifically targeted toward young people, juvenile justice, and the percentage of county's budget directed toward youth mental health services. This information was used to form focus group agendas and data directed surveys, group deliberation, and verification for recommendations made to the Clark County Board of County Commissioners.

### Expert Consultation

Mental Health Awareness Night took place on May 29, 2007. It was comprised of Youth Commissioners, local teens, county mental health professionals, two counselors, two psychology graduate students, youth mental health consumers, and youth house staff. Our discussion covered topics about the definition of mental health, affordable professional help, personal mental health experiences, cultural backgrounds that influence mental health, and confidentiality when seeking help.

### Surveys

Surveys (Appendix V) were distributed by Youth Commissioners in various classes at Evergreen High School, Mountain View High School, Pacific Middle School, Ridgefield High School and Skyview High School. These schools were chosen to represent the different youth in our county. Seventy-seven students from these five Clark County schools participated in the survey, responding to questions about depression, mental health services directed toward youth, education, general mental health, and what they would like to see the county do to improve the mental health of young people. These surveys were collected or mailed anonymously to the Clark County Department of Community Services and then analyzed by the Youth Commission.

### Focus Groups

A focus group session occurred at the Youth House on June 21<sup>st</sup>, 2007. Moderated by a Youth Commissioner, the focus group was comprised of twelve diverse Youth Commissioners. These participants were asked to convey their experience, knowledge, and opinions surrounding the issue of mental health as it applies and pertains to youth in our community. The discussion began with open-ended questions and topics (Appendix III) to promote a positive environment in which mental health issues could be addressed approximately and effectively. These topics ranged from personal

experience with depression and mental health issues to the knowledge of services available to young people in need of mental health assistance. The focus group concluded with a discussion centered on ideal services that Clark County could offer to youth in the way of mental health services. This information was used by the Clark County Youth Commission in developing the recommendations to the Clark County Board of County Commissioners. Keeping the speakers' identity anonymous, two recorders kept track of key points in the conversation. These key points were used to finalize the recommendations made to the BOCC.

Below are the key points that anonymous Youth Commissioners have given for Question 5 on the survey, which asked:

Have you ever been depressed? What made you feel that way?

- Death in the family or that of a loved one
- Boyfriend/girlfriend breaking up
- Feeling alone
- Lack of sleep
- Bullying
- Threatened (with murder)
- Over-working
- Self-esteem/self-image
- Overweight
- Peer pressure
- Confusion, not being able to express how you feel
- Medications/drugs (birth control-emotions)
- No production (it feels good when you accomplish something)
- Seasonal Depression ( Dark, no sun and your mood changes with it OR sun, people who don't like the sun are depressed a lot)
- Environment ( music effects your mood, the people who surround you)
- Eating disorders such as bulimia and anorexia (people trying to be like people that are not real: models, "photoshopped" people)

How did you overcome your depression?

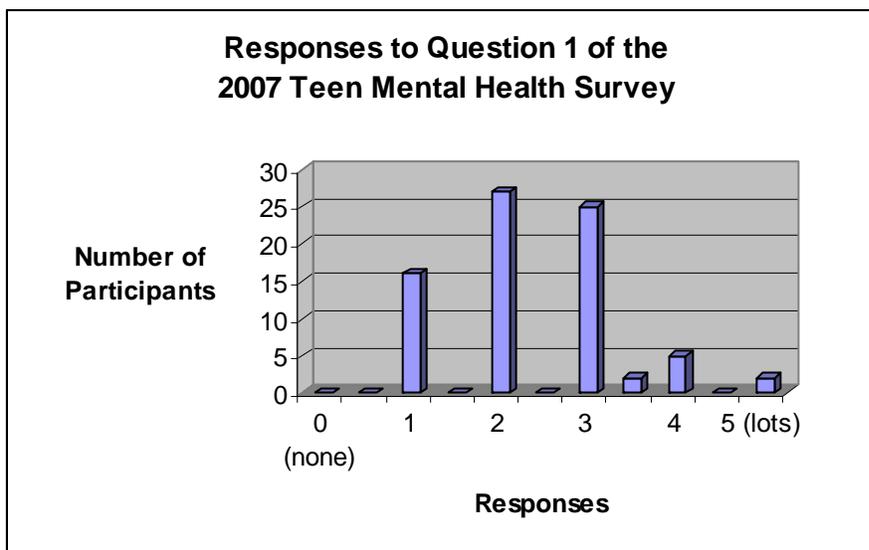
- Talked to adults
- Moved to a new school
- Talked to principal/vice principal
- Volunteering

## DATA & RESULTS

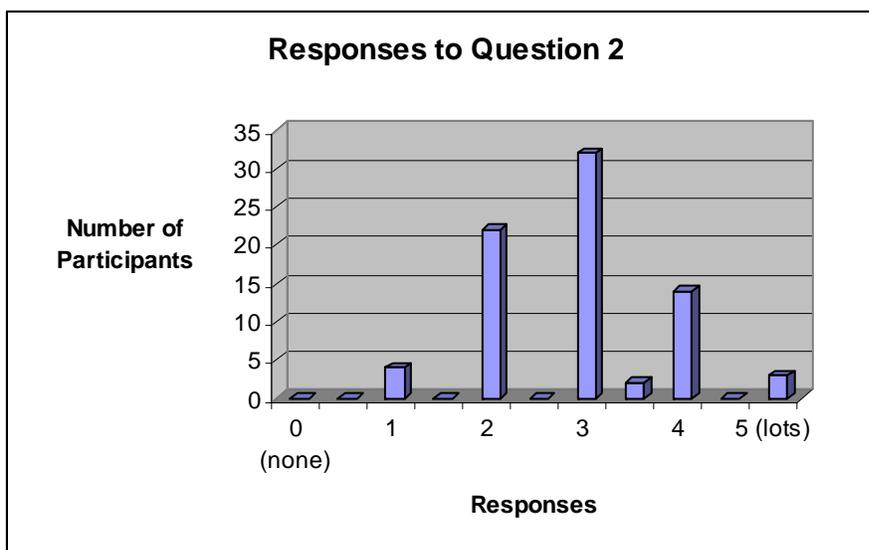
### Quantitative Data

The following data represents the answers to various subjects of an anonymous survey that was distributed in classrooms in Evergreen High School, Mountain View High School, Pacific Middle School, Ridgefield High School and Skyview High School. Seventy-seven students participated in the survey.

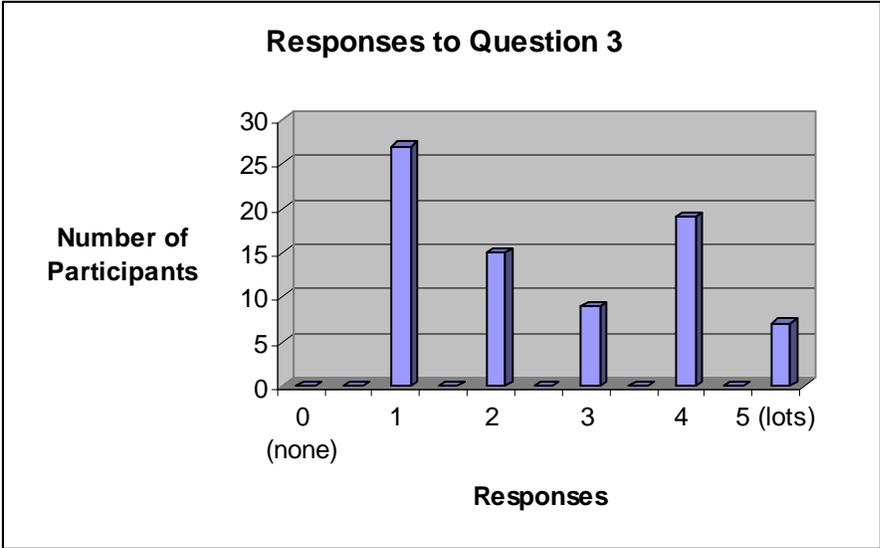
The participants circled the number they felt best represented their stance on each question. An answer of **0** meant **none**. An answer of **5** meant **lots**.



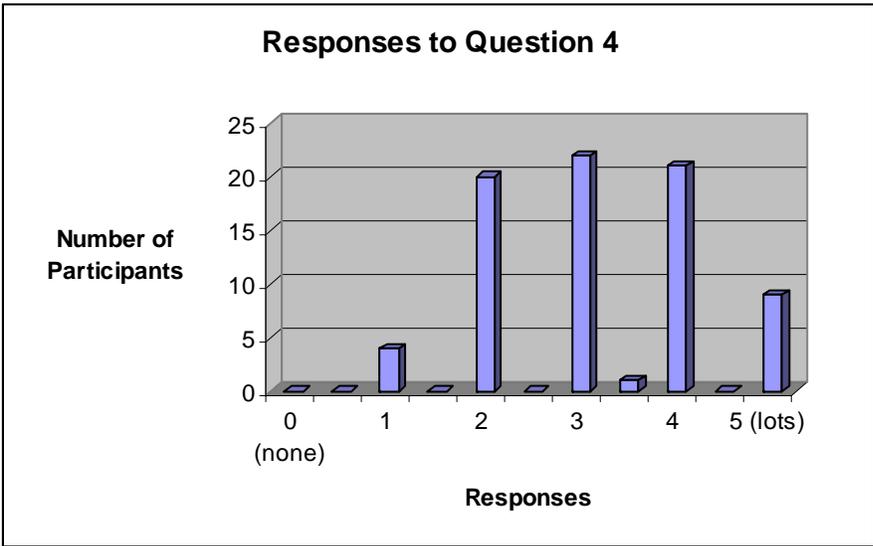
**Question 1**  
How much do you think local government is involved in helping teens deal with mental health issues?



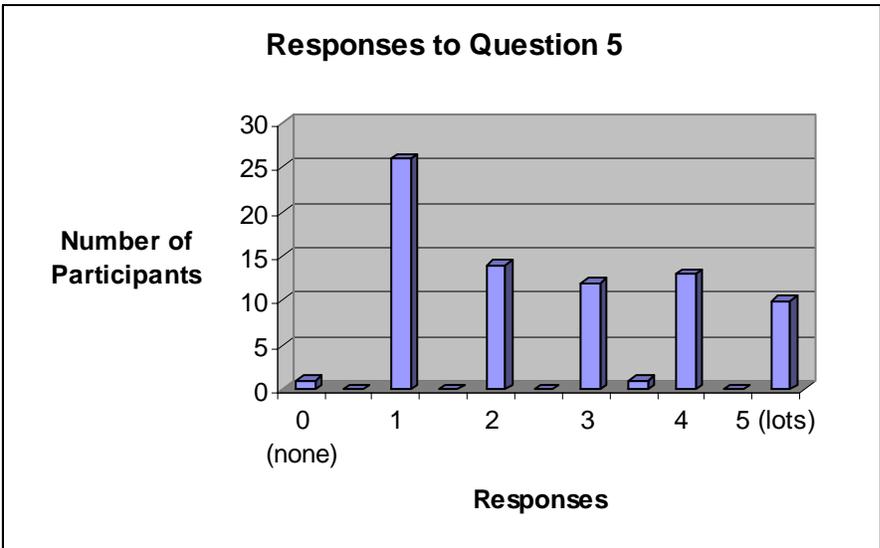
**Question 2**  
Do you think teens with mental health issues/questions have adequate access to local resources?



**Question 3**  
 Have any of your friends ever talked to you about feeling depressed/mentally unstable?



**Question 4**  
 How much education have you received regarding mental health?



**Question 5**  
 Do you ever feel depressed?

Responses to Questions 1-5 of the 2007 Teen Mental Health Survey											
Question	0	0.5	1	1.5	2	2.5	3	3.5	4	4.5	5
1	0	0	16	0	27	0	25	2	5	0	2
2	0	0	4	0	22	0	32	2	14	0	3
3	0	0	27	0	15	0	9	0	19	0	7
4	0	0	4	0	20	0	22	1	21	0	9
5	1	0	26	0	14	0	12	1	13	0	10

### Qualitative Data

The final four questions from the survey used to attain the quantitative data were free response questions. The questions were as follows:

6. What made you feel that way (depressed, based off the qualitative answer from the aforementioned question number 5)?
7. Who, if anyone, would you feel comfortable talking to about your condition?
8. What contributes to being mentally healthy?
9. What could or should the county do to improve youth mental health?

Among the 312 individual responses, the following quotations best represent trends in the answers to each question:

**Question 6: What made you feel that way (depressed, based off the qualitative answer from the aforementioned question number 5)?**

“Grades (school things).”

“The weather.”

“Nothing, I have never been depressed.”

“Problems at home, with family, with friends.”

“Various things, mostly personal, academic, pressure, and personal relationships.”

“Stress, heavy workload, possibly not exercising enough.”

“Lack of sleep led to no coping.”

“Family, mostly my mom because she is bipolar.”

“Stupid people, yelling, violence, stress, often for absolutely no reason.”

**Question 7: Who, if anyone, would you feel comfortable talking to about your condition?**

“No one, I am alone.”

“Parents and friends.”

“Youth House staff, a few friends.”

“I don’t really feel comfortable talking to anyone about it.”

“Just my current friends or someone I’m close with in my family. Possible a counselor with a privacy policy.”

“Counselors, especially the one I’m most familiar with. I’d exclude my parents because I’m slightly distant emotionally.”

**Question 8: What contributes to being mentally healthy?**

“Good social behavior and being physically balanced.”

“Your environment.”

“Sharing your feelings and not keeping [them] bottled up.”

“Having a positive outlook on life and being able to move past obstacles.”

“Happiness? Being able to balance logic and emotions.”

“Being physically healthy, exercising physically, as well as brain exercises, eating well, feeling loved – just taking care of yourself.”

“Believing in yourself and having self-confidence.”

**Question 9: What could or should the county do to improve youth mental health?**

“You don’t hear about teen mental health issues as much as adult mental health issues. Under-coverage and under-education are key problems.”

“Provide more education, but not at school.”

“Have more resources for people without insurance.”

“They should get to know youth more so they know how we are.”

“Education reform to support and encourage students, less social taboo on many mental health problems.”

“Make the symptoms of it more aware to people and more capable to talk to someone about it.”

“Help. I don’t know how. Just help me.”

“Make school counselors more available to help kids. Make an educational website and publicize it to high school kids.”

“I think they are doing a good enough job ☺”

“Publicize local resources, like teen hotlines.”

“Set aside a special clinic for helping teens with their mental health.”

“I’m not sure there is anything. If someone does have a problem, they should have had enough education to know that they should get help. The feeling of shame that a person might have in getting help is a problem with our culture, not necessarily a thing the government can change.”

“Educate everyone about reducing mental stigma through high school presentation.”

“Have more groups that are fair to people and easy to get to.”

### Deliberation

The purpose of the deliberation was to reach a position on which recommendations would be given to the BOCC in regard to the youth mental health policy assignment. The Youth Commissioners reviewed research, survey data and responses, as well as notes documented from the focus group. After the materials were reviewed, a quorum of Youth Commissioners (at least twelve members) began formal deliberation. After brainstorming, research consulting and discussion between the group, recommendations were formulated and voted upon.

## RECOMMENDATIONS TO THE BOCC

After examining the student responses from the survey responses (Appendix VI) the Youth Commissioners deliberated and took note of specific trends adhering particularly to question number 9 (how the county could help adolescents regarding depression). The general trends were noted to be responses including reducing stigma, providing and improving education, support groups for families and individuals, improvement in physical health, more county involvement with youth activities, special programs to combat teen depression, and improving the social and physical environment to have a more nurturing atmosphere. Ideas and recommendations for each concern follows:

### Education

*The responses of many of the survey participants mentioned improving education about mental health policies, effects, and resources. Some effective ways the Youth Commission feels the county can address these concerns include the following:*

- **Website**

A county website or extension of the county website that is youth friendly can be created to inform youth about various local resources for depression and community events that might promote proactive, jovial atmospheres. The website would also contain general knowledge on how to identify depression provided by mental health experts.

- **Fliers**

Fliers can be handed out with school supplies each summer at local retail stores containing helpful tips on how to relieve stress. According to the survey question that asked why those being surveyed were ever depressed, many of the answers were linked to school and stress. Organizational and studying skills are not always easily acquired, but tips on paper to be included with backpacks, school materials, textbooks, etc. would be beneficial first steps to giving students ideas of where to begin in terms of dealing with stress.

- **Motivational Speakers**

Motivational speakers talking to the public in open quarters would be a good way to inform local citizens. Many people do not have the opportunity to hear motivational speakers, and providing effective speakers on depression could help open the minds of parents and students on how to attain strategies to identify and help combat depression.

- **Public Service Announcements**

The Youth Commission feels that public service announcements containing much of the aforementioned information on identifying depression, treating depression, and

resources to do so would be a good way to let local youth learn more who do not run across fliers or written informational resources in the community.

- **The Spot**

A youth-centered facility that offers various entertainment and retail businesses would promote a youth-friendly environment that would also provide information on mental illnesses and how to treat them.

- **Life Coach**

The ability for a teen who is struggling to organize his/her life in preparation for college/post high school education to call a professional or volunteer “life coach” who would help the troubled student achieve the necessary goals needed to start the next portion of their life. Many teens have felt helpless when they did not know how to apply to college, keep grades up, manage homework, etc. in preparation for higher education. This service could possibly be a part of the counseling center mentioned below.

## Stigma

*The Youth Commission also realizes that the stigma on mental illnesses sometimes inhibits an individual's sense of freedom to be candid about the situation, and consequently their access to mental health resources. The recommendations listed above regarding education are seen not only as methods of improving awareness of dealing, treating, identifying, and understanding mental illnesses, but also as means of advocating acceptance of the issue.*

## Physical Health

*When asked how students defined living happy, non-depressed lifestyles, many believed that living physically healthy lifestyles was a major part of the definition. The Youth Commission has deliberated and recommends the following as potential activities for youth in the community.*

- **Community Events**

Monthly community events sponsored by local businesses or government including mental health jog-a-thons, walkathons, and sport tournaments could give youth short-term events to look forward to each month that would not require long-term commitment but would provide healthy fun.

- **Free Venues**

Free venues to have guided workouts or yoga would provide adequate peace-of-mind for many youth in the community.

- **Intramural Sports**

After-school intramural sports promoted by the county would be a great way to keep students who feel excluded from school sports that “cut” some athletes to keep being healthy and continue to improve and have fun with sports.

- **Wilderness Program**

A “wilderness” program could reach out to lonely adventurers, providing a common meeting ground for those who like to participate in outdoor activities such as hiking, kayaking, rock climbing etc. The program would help these individuals plan outings together and get to know each other personally. Perhaps a partnership could be struck up with a local sporting goods retailer to provide cheap/ reduced rates on rental gear.

### Involvement

*Some students felt that the exclusion of youth voice makes the availability of mental health resources directly for youth more difficult. The Youth Commission recommends the following to improve this concern of the local youth:*

- **Youth Representation**

Mental health advisory boards that already exist have no youth representatives, so with the addition of a youth voice, more concerns could be addressed and fixed. Providing such an opportunity for youth would be a great way to improve the relations between youth and local government.

- **Youth Mental Health Advisory Board**

If the inclusion of youth representatives in the current advisory boards does not seem entirely feasible, a supplementary youth mental health advisory board could also convey the concerns of youth.

- **Representation of Parents**

An adult mental health advisory board’s inclusion of parents is a critical piece of improving mental health relations, especially considering how many students felt their parents having a better understanding of them would help them feel happier.

### Special Programs

*The following ideas are additional innovative programs that have been discussed to supplement the aforementioned recommendations and to address the other aspects of mental health.*

- **Youth Counseling Center**

A Clark County Youth Counseling Center that would deal with much of the free community events previously mentioned in the recommendations could be pioneered to pinpoint a particular group that would be in charge of activities, day or

field trips, and other happenings regarding combating depression. This free or affordable counseling center would provide counselors and mental health professionals, specializing in issues facing young people, for one-on-one counseling sessions in addition to group counseling sessions. The Clark County Youth Counseling Center would facilitate educational group activities to promote awareness of mental health issues and to reduce stigma surrounding the subject through an increase in knowledge. These activities and the counseling center would be available to young people in our county during after school and weekend hours, times when youth are most likely to utilize these services.

- **Respite Care**

Respite care could be available specifically for youth who are caregivers in their family. This resource would be a great relief for young people who have to juggle their school lives with the overwhelming needs of their families. As long as this program is made readily available to youth through school counseling centers and hospitals, youth who must deal with family issues would be able to temporarily relieve themselves of the burden that often leads to their own feelings of stress and depression.

- **Juvenile Justice**

According to the statistics found on the website of Center for the Promotion of Mental Health in Juvenile Justice, 65% of the youth in juvenile correctional facilities have mental disorders, and 40% of those youth do not receive treatment prior to court involvement. These facilities and their staff are not sufficiently equipped to treat this different group of individuals. The Youth Commission realizes that Clark County has actively been addressing this issue through its Connections program, and applauds the county's actions and the success the program has brought to the county's youth. The Youth Commission supports continued funding for alternative correctional facilities and programs that are better outfitted for the needs of individuals with mental illnesses to make the correctional justice system more efficient with treating these individuals.

- **Excluded Youth**

Although the needs of mental health consumers can be better met with the indicated recommendations, the Youth Commission realizes that there is a large gap of consumers that are not represented and therefore are not able to use the available resources. This group consists of individuals who do not have Medicaid or any health insurance and are not able to receive it. As many youth do not have the power to make the decisions in their family, these youth suffer from exclusion of resources that can be vital to treating their mental illnesses.

- **Support Groups/Peer Networking**

Many students who responded to the surveys thought they needed support groups outside of immediate family and friends to help deal with their issues. The Youth Commission noted that, in the aforementioned education recommendations, current resources could be better advertised to youth. However, the Youth Commission also feels support groups in and out of school would be beneficial. As a group comprised of so many different youth around the county, the Youth Commission understands the positive effects of peer networking.

## Conclusion

As a commission we feel that we have accurately and solidly expressed the viewpoints of our fellow young people concerning the topic of youth mental health. We continually checked our own actions and opinions to be sure that this survey of public thought was carried out and reported as objectively as possible. As this survey shows, young people today are faced by numerous stresses and pressures which may or may not be recognized by our adult contemporaries. While daily emotional trauma (i.e. school, social problems, family tension) is unavoidable as a teenager, the means to deal with stress and mental instability are attainable and should be seriously looked at in order to create a happy, healthy, and successful community.

## CLOSING

On behalf of Clark County's youth, the Clark County Youth Commission would like to extend sincere and heartfelt gratitude to the Clark County Board of County Commissioners for their continuing encouragement and concern for the wellbeing of young people in our community. We would like to thank you for your support of the Clark County Youth Commission and for enabling our involvement in the county through assignments like this policy assignment report that has given us a chance to shed light on a subject of great influence and concern to many young people. As representatives and advocates for Clark County's youth, we feel that our report accurately and effectively addresses the subject of depression as it pertains to youth and appreciate your time and care in the issue.

## Appendix

- I. Outline of the January 24<sup>th</sup> Work Session with the BOCC
- II. Public Policy Focus: How We Chose Mental Health and Process and Desired Outcomes
- III. Focus group moderator script
- IV. Mental Health Awareness Night Agenda
- V. Teen Mental Health Survey
- VI. Survey Responses



Youth Commission  
Work Session with  
Clark County Board of Commissioners  
January 24, 2007

- Introductions: who we are, where we come from, what we are passionate about.
- Our work so far this term – July 2006-Present:
  - Identification and initial planning of our three major projects: policy assignment, youth-driven project and Youth Achievement Celebration
  - Participation in Youth Town Hall
- Summary of Winter Retreat January 19-21, 2007
- Progress on Public Policy Assignment
- Youth Driven Project
- Additional Opportunities for Youth Involvement:
  - Appointment of Youth Commissioner to Meth Task Force
  - Appointment of Youth Commissioner to Transportation Advisory Group
  - Continued development of the SPOT
  - Possible partnership with District Courts regarding Teen Traffic Court
  - Possible partnership with City of Vancouver regarding a county-wide music festival
  - Possible partnership with Leadership Clark County class of 2007 regarding youth voting
  - Possible development of a Youth Leadership Academy
- Questions and discussion

**Clark County Youth Commission**  
**Public Policy Focus:**  
**Mental Health**

**How we chose Mental Health:**

In October 2006, Bill Barron came to our meeting to discuss our public policy assignment. He suggested several topics including: public health issues such as obesity, lifestyle, teen health and mental health, the Meth crisis, a revision of the twenty-year economic development plan, and sustainable (or green) development. Our deliberation was an intense process. After some time, we focused on Public Health.

The youth commission was split. Before our retreat we came up with four separate parts of public health that are important to us and Clark County youth. At the retreat we split into four separate groups, each representing a different aspect of public health: meth, teenage sex education, mental health, and obesity.

- Under the topic of meth use we were concerned about the lasting affects that meth has on children of addicts and the tax that the drug puts on our justice system.
- Concerning teenage sex education, we felt that school health classes were inadequately informing teenagers about the complexities of relationships and the impacts of our decisions.
- In the mental health category we talked about addressing the needs of local teens with mental health issues in the most efficient manner.
- Obesity is a growing problem in Clark County and we considered different options that would create the healthiest environment for its citizens.

After two hours of heated debate at our winter retreat and 45 minutes of voting, we finally concluded that we would like to investigate further the problem of mental health.

To obtain the information, we plan to host focus groups with students from not only different schools, but different walks of life to get a wide range of opinions. We plan on addressing how to improve communication with people with mental illness, and to expose the most effective means for them to find help. Our final outcome will be in the form of a policy recommendation which will help make life better for young people with a mental illness.

*Compiled and Written by: Jonathan Groat, Evelyn Harper, Mark Stayton, and Renata Fusso*

**Process and Desired Outcomes:**

We as a Youth Commission have agreed upon the following desired outcomes in connection to our Mental Health policy assignment:

- We will make a commitment to go to at least four area high schools and see at least two hundred students in focus groups to gather data, information and advice from our peers.
- We will compile their results to make specific recommendation in accordance to the research we gather from the focus groups, for example the following could be a recommendation that the youth might bring forth;

“There should be a Suicide place for teens to go, a possible example would be a place where they can talk to a person with experience. Their friends or family might not be the person to talk with because they might want to have a one-on-one discussion.” *Lily Swindell, 11th grade.*

Our plan is to proceed with and finish the focus groups within the next three months. With the ultimate goal of presenting our findings to the Board of County Commissioners by late May. At this time we will also present to the Board of County Commissioners with a written summary of our results.

*Compiled and Written by: Sarah Lawer, Lily Swindell, Ashli-Marie Grant, Jessie Dinius*

**CLARK COUNTY YOUTH COMMISSION  
PUBLIC POLICY ASSIGNMENT: MENTAL HEALTH: TEENAGERS  
FOCUS GROUP  
June 21, 2007**

Hello, my name is Joseph Matter and these are my fellow youth commissioners \_\_\_\_\_ and \_\_\_\_\_. I will be facilitating this meeting tonight and they will be recording the information that you have willingly agreed to help us with. I would like to tell you why we are here tonight. Each year the Board of County Commissioners give us a public policy assignment, which they are currently working on, and give them the “teen perspective” upon it. This year’s happened to be Mental Health, specifically regarding teenagers. I would like to thank you in advance for coming here tonight to help us out. Since this is a focus group, we would like to tell you that this meeting isn’t like a classroom, you don’t have to raise your hand before you speak. Feel free to get into discussion with the other people tonight and express your views on the topic, while respecting the views of others. Please feel free to eat as much pizza as you want and drink as much soda as you want. Just feel at home. Let’s introduce each other through an icebreaker.

**ICEBREAKER:**

(Pass out pieces of paper) First of all, would you please write your name down on the piece of paper I gave you. In a minute I will collect the names and put them in \_\_\_\_\_. Then you will draw a name, if it is your name, or you know the person, please re-draw, if it is someone you know, see if you could learn anything about them. Please do not tell anyone who you have. During this focus group, study the person of the name you drew and at the end we will reveal who we had and tell the group what we thought were cool about them.

Let’s go around and introduce ourselves by giving our name, age, and favorite activity to do after school.

.....

Don’t forget to study your person, but be discrete. Let’s get started.

1. First of all, what do you guys **think** “mental illness/health” is?
2. What do you think is going on with kids like you at school?
3. What do you think is going on with Mental Health? For example: funds, treatment.
4. What resources do you know is available if you need information on Mental Health?
5. What do you think could be done in our community regarding Mental Health?
6. Define “stigma.”
7. Why do you think people experience stigma?
8. What do you think could be done to reduce stigma?
9. What do **YOU** want to know about Mental Health?

10. What ways do you think information regarding mental health could be easily brought to your attention or knowledge in a way that would appeal to you to know the information and maybe even want more?
11. If one thing could be created that would support young people's mental health, what would it be?
12. Do you think adults in your life know what's going on for teen's mental health?

Thanks for the awesome help everyone! Let's end this focus group with the icebreaker we started off with. When the person who drew your name finished speaking, it is your turn. Who wants to go first?

Thank you everyone for coming!

**Youth House  
Mental Health Awareness Night  
May 29, 2007  
6-8 p.m.**

Hosted by the Clark County Youth Commission and  
The Options Program

Who: Youth from the Clark County area and mental health professionals

Purpose: To share information across age groups and experiences and raise awareness about mental health.

- ☉ Welcome, Introductions, and Ground Rules
  - Introductory questions (1-5)
  
- ☉ Define “mental illness/health”
  
- ☉ Share information on youth-oriented programs and county’s current mental health policies
  
- ☉ Discuss what kinds of supports are still needed
  
- ☉ Questions & Answers
  - Stigma
  - Parity
  - Counseling at schools
  - Free clinic- Planned Parenthood as model?
  - *Unaskable* questions?
  - The rest of the facilitator questions

## Teen Mental Health Survey

- |  | (little) |   |   |   | (lots) |
|--|----------|---|---|---|--------|
| 1. How much do you think local government is involved in helping teens deal with mental health issues? | 1        | 2 | 3 | 4 | 5      |
| 2. Do you think teens with mental health issues/questions have adequate access to local resources?     | 1        | 2 | 3 | 4 | 5      |
| 3. Have any of your friends ever talked to you about feeling depressed/mentally unstable?              | 1        | 2 | 3 | 4 | 5      |
| 4. How much education have you received regarding mental health?                                       | 1        | 2 | 3 | 4 | 5      |
| 5. Have you ever felt depressed?   | 1        | 2 | 3 | 4 | 5      |
| 6. What made you feel that way?  |          |   |   |   |        |
| 7. Who, if anyone, would you feel comfortable talking to about your condition?                         |          |   |   |   |        |
| 8. What contributes to being mentally healthy?   |          |   |   |   |        |
| 9. What could or should the county do to improve youth mental health?                                  |          |   |   |   |        |

Thank you ☺

## 6. What made you feel that way?

"Life, things that have happened. My boyfriend breaking up with me."

"Family, friends, mostly my parents."

"Stress"

"I don't think I've ever been depressed. Maybe sad due to family issues, cancer, etc."

"I've never felt depressed. Stressed, yes."

"Part of my family."

"I was depressed when I had sports and too much homework going at one time."

"From projects."

"Just little things like bad grades or stupid stuff."

"I was really stressed out over school/extracurricular responsibilities. Getting in to my choice of college was a big reason also. Trying to fit in."

"The stress of meeting deadlines at school and at work. Having to deal with issues involving friends and family."

"Grades (school things.)"

"Drama at school with friends."

"My mom grounded me."

"Loss of pets."

"Grades."

"Family passing away, low self esteem, everything going wrong, every little thing annoying me (clicking, sounds, someone whistling)."

"The weather."

"Fighting with friends and family."

"School, and everything going on."

"Nothing, I have never been depressed."

"Problems at home, with family, with friends."

"My multiple personalities won't shut up."

"My grandmother died, and she and I were very close."

"My father's death."

"You don't hear about teen mental health issues as much as adult mental health issues. Under-coverage and under-education are key problems."

"The pressure of grades."

"Stress, work, personal issues."

"Various things, mostly personal, academic, pressure, and personal relationships."

"Stress, heavy workload, possibly not exercising enough."

"Not feeling adequate because of stress from school, not feeling loved."

"Stress"

"A great deal of stress resulting from work overload."

"From schoolwork, academic stress, college stress."

"Stress, school pressure."

"Backstabbing friends and bullies."

"I haven't really felt depressed."  
"Variety of environmental factors."  
"My mom and I fightin."  
"I have never been depressed."  
"Never been depressed."  
"I've ever been depressed."  
"My dad abandoning my sister and myself last year for two days."  
"School, stress, time (not enough,) family problems, financial worries."  
"Problems/Big issues with whole family. If boyfriend relationships aren't doing as well as hoped (by a great deal), school and work."  
"Lack of sleep led to no coping."  
"Pressure, stress, school."  
"School, others stressful activities."  
"I have never been depressed."  
"Social issues, girlfriend, friends, school, etc."  
"My parents fighting/almost divorce. Bad situations in family."  
"When I was bored."  
"Stuff at home."  
"My dad left."  
"Family, mostly my mom because she is bipolar."  
"My little sister died, two of my dogs died, my mom came out to me as a lesbian, just a lot of stuff. All the pills I have to take daily."  
"Family life, school life, friends, pressure, bad luck."  
"Stupid people, yelling, violence, stress, often for absolutely no reason."

## **7. Who, if anyone, would you feel comfortable talking to about your condition?**

"A friend who is very close. I can tell her anything when I have a problem."  
"My mom, a few close friends."  
"Youth House staff, a few friends."  
"My mental health and I can contribute to my healthy relationships with my family and friends. My relationship with God also keeps me 'in line.'"  
"I would only feel comfortable with family."  
"Nobody, preferably."  
"One of my friends, mom, older sister."  
"I don't really feel comfortable talking to anyone about it."  
"My mama."  
"My friends."  
"My mom, one of my friends, my dog."  
"My teachers."  
"My mom and my sister."  
"My best friends that I trust."

"Just my current friends or someone I'm close with in my family. Possible a counselor with a privacy policy."

"Maybe a parent or family."

"I have talked about it."

"My best friends, parents, and sister."

"Family."

"My friends and my counselor."

"A very close friend or someone I knew I could trust in confidentiality."

"Never been depressed, but my mom."

"My brother."

"No one, I am alone."

"Parents and friends."

"My youth group leader."

"My closest friends."

"I don't need to talk to anyone."

"Anyone that I didn't know well."

"Parents and friends."

"If I had one, it would be my parents."

"Love my mother and father <3"

"I don't have one."

"My dad, my mom."

"My friends."

"Very close friends, sometimes parents."

"Youth pastor, *close* friends, parents (sometimes.)"

"Counselors, especially the one I'm most familiar with. I'd exclude my parents because I'm slightly distant emotionally."

"My parents."

"My boyfriend, my best friend who has also felt that way, my aunt."

"Parents, counselors."

"My family, girlfriend."

"Counselor"

"My friends, several teachers, and counselors."

"Friend, possibly teachers or counselors I know well."

"My best friend, my lover, my parents."

"Someone I'm close to, a friend or a cousin."

"I deal with it myself, or talk to friends."

"Brothers, sisters."

"My basketball coach."

"There are various adults in my life who I could talk to - church leaders, etc."

## **8. What contributes to being mentally healthy?**

"Not being depressed, eating well."

"You're stable, your other health is equal, you have no genetic problems."

"Being able to talk to someone about it whenever necessary."  
"Having friends to talk to, being secure (financially and otherwise.)"  
"Sun! And a positive attitude"  
"Having a good home and school life."  
"Good social behavior and being physically balanced."  
"Knowledge."  
"Talk to friends and hang out a lot."  
"Make more resourced known and available in school and places youth go to."  
"A stable life."  
"Not being depressed/angry on a daily basis."  
"A stable home environment, friends who promote... good things. Shall we say, "good influences."  
"Staying active, being positive."  
"Stable home/school environments. Healthy family/friend relationships."  
"Someone to talk to, a personal escape (guitar, longboarding, etc.)"  
"Having a positive attitude, getting good sleep, and just having [a] positive mentality."  
"Being open-minded and having a good life and education."  
"Friends and feeling good."  
"Keep a good level of self-confidence."  
"My mom, friends, my church."  
"Talking about your feelings."  
"Having good friends and relative you can talk to. Being successful in some way (it makes you feel good about yourself.)"  
"Staying active, being social, and exercising your brain."  
"The way you feel about yourself and your attitude."  
"Knowing how to deal with stress."  
"Organization."  
"A good, healthy, happy childhood and family life. Support of teachers, friends, and family. Positive human connections in general."  
"Self-esteem, friends, no peer pressure."  
"Your environment."  
"Making right choices."  
"Staying out of high school drama, being physically healthy, hanging with stable, healthy friends."  
"Exercise."  
"Sharing your feelings and not keeping [them] bottled up."  
"Having a good attitude, not letting little things get to you so easily, making everyday worthwhile."  
"Healthy lifestyle. No drugs."  
"Focus, happiness, a little anxiety."  
"Exercise, family, friends."  
"Environment and biological factors."  
"Being physically healthy, faith, trust."

“A balance between stress and relaxation.”  
“Having a positive outlook on life and being able to move past obstacles.”  
“Little stress, good healthy food, plentiful sleep, encouragement, and a challenge and success.”  
“A good childhood, growing environment.”  
“Happiness? Being able to balance logic and emotions.”  
“Being physically healthy, exercising physically, as well as brain exercises, eating well, feeling loved—just taking care of yourself.”  
“Sleep, being outspoken”  
“Having a healthy relationship with your family and having supportive friends.”  
“Living in a good, supportive environment.”  
“Living [up to] one’s standards.”  
“Believing in yourself and having self-confidence.”

## **9. What could or should the county do to improve youth mental health?**

“Provide more education, but not at school.”  
“Make school easier.”  
“Talk more about the issues and highlight the ways they can be solved and places to go for help.”  
“Have us be more educated about where we can get help.”  
“Have more resources for people without insurance.”  
“Let us get more involved.”  
“They should get to know youth more so they know how we are.”  
“Give more info to youth on where they can get help especially low income families.”  
“Education reform to support and encourage students, less social taboo on many mental health problems.”  
“Teach more, give more resources.”  
“Make the symptoms of it more aware to people and more capable to talk to someone about it.”  
“Have more groups and better advertisement.”  
“Help. I don’t know how. Just help me.”  
“Make activities so people can feel involved.”  
“Have more get-togethers, like teen dancing, to unite everyone.”  
“Actually work to educate people.”  
“Get more involved.”  
“Educate more people about the problems.”  
“Have more stuff for youth to do.”  
“Make a program to help.”  
“Establish more help centers.”  
“Make school counselors more available to help kids. Make an educational website and publicize it to high school kids.”  
“Making education fun.”  
“More emphasis on support groups.”

"Make people aware, give out healthy food at schools, and other peppy stuff."  
"Have sessions everyday for mental health."  
"Let people know of activities that can help people with mental illnesses."  
"I think they are doing a good enough job ☺"  
"Provide more activities and talk groups for health."  
"Publicize local resourced, like teen hotlines."  
"Start more youth groups so people can open up to each other."  
"Offer more resources about depression, more counselors, and family/social help."  
"Put the focus on it more. Just get the people to actually think of it as a big issue."  
"I think it's fine the way it is."  
"Set aside a special clinic for helping teens with their mental health."  
"The improvement of concerned educators."  
"Promote education and awareness concerning mental health."  
"Educational reform, emphasis on communication, acceptance, and downing the concept of 'taboo' and other socially exclusive concepts."  
"Better service. Stop telling kids what they feel."  
"I'm not sure there is anything. If someone does have a problem, they should have had enough education to know that they should get help. The feeling of shame that a person might have in getting help is a problem with our culture, not necessarily a thing the government can change."  
"Involvement"  
"To promote a healthier lifestyle."  
"Support high morals."  
"Promote awareness."  
"Inform, get active, and stop showing what they do, a.k.a. messing us up."  
"A lot of it is personal. I wouldn't seek county help unless I was desperate."  
"Educate everyone about reducing mental stigma through high school presentation."  
"Have more groups that are fair to people and easy to get to."